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Attorney Docket No.

COMBINED DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that

My residence, post office address and citizenship are as stated below next to my name.

(if plura	al names are listed below	nd sole inventor (if only one) of the subject matter which levice with rotary flywelght	name is listed below) or an originalis claimed and for which a paten s	al, first and joint inventor t is sought on the inven-	
the spe	ecification of which: (chec	k one)			
		REGULAR OR DESIG	ON APPLICATION		
	is attached hereto.				
	was filed on	as applica	ation Serlal No.		
	and was amended on	(1	f applicable).		
	PC'	T FILED APPLICATION EN	TERING NATIONAL STAGE		
	was described and claimed in International application No. <u>PCT/FR04/000477</u> filed on <u>March 1, 2004</u> and as amended on(if any).				
l hereb	y state that I have review as amended by any ame	wed and understand the condition and understa	ntents of the above-identified spo	ecification, including the	
	wledge the duty to disclo- tions, §1.56.	se information which is mate PRIORITY	rial to patentability as defined in T	Title 37, Code of Federal	
cate lis	ted below and have also	enefits under 35 USC 119 of identified below any foreign ation on which priority is claim	f any foreign application(s) for pa application for patent or inventor ned.	tent or inventor's certifi- s certificate having a fil-	
Ů	,,	PRIOR FOREIGN A			
	Country	Application	Date of Filing	Priority	
		Number	(day, month, year)	Claimed	
<u> </u>	FRANCE	03 03412	20/03/2003	Yes	
	y claim the benefit under listed below:	Title 35, United States Code	§119(e) of any United States pro	visional patent applica-	
Applica	tion No.	Filing Date	Status (patented, p	ending abandoned)	
(Comp	lete this part only if this is	a continuing application.)			
ject ma provide patenta	itter of each of the claims of by the first paragraph ability as defined in Title 3	of this application is not disc of 35 USC 112. I acknowled	States application(s) listed below losed in the prior United States a dge the duty to disclose informations §1,56 which became available illing date of this application:	pplication in the manner ion which is material to	
Annline	tion No	Filing Date	Status (patented, p	endino abandoned)	

2 003/004

Docket No.

POWER OF ATTORNEY

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from GPI & Associés as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned. In the event of a change in the persons from whom instructions may be taken, the U.S. attorney or agent named herein will be so notified by the undersigned.

As a named inventor, I hereby appoint the registered patent attorneys represented by Customer No. 00466 to prosecute this application and transact all business in the Patent and Trademark Office connected therewith, including: Robert J. PATCH, Reg. No. 17,355, Andrew J. PATCH, Reg. No. 32,925, Robert F. HARGEST, Reg. No. 25,590, Benoît CASTEL, Reg. No. 35,041, Thomas W. PERKINS, Reg. No. 33,027, Roland E. LONG, Jr., Reg. No. 41,949, Eric JENSEN, Reg. No. 37,855, Liam MCDOWELL, Reg. No. 44,231, and Philip A. DUBOIS, Reg. No. 50,696,

c/o YOUNG & THOMPSON Second Floor 745 South 23rd Street Arlington, Virginia 22202

Customer Number

Address all telephone calls to Young & Thompson at 703/521-2297. Telefax: 703/685-0573.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on Information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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	Residence:	Citizenship:		
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	Full name of fourth joint inventor, if any:			
	Inventor's signature:	Date:		
	Residence:	Citizenship:		
	Post Office Address:			